

INTEGRATED PRACTICAL EXAM

Practical Testing Assistant Feedback Form

Location of Exam: _____

Type of Exam: _____ Skill Based _____ Scenario Based

Please answer the following questions as thoroughly as you can. We want to learn as much as we can from you about your IPE Experience. Your honest assessment of the IPE you just completed will assist us to improve the exam process. Please feel free to offer any other comments you feel will assist us in improving this process

Please rate the following statements about the Integrated Practical Exam (IPE) based on your participation. Please circle your response on using the following scale of 5 being the highest, or most positive score, and 1 being the lowest, or least positive score. Feel free to comment further on any specific items in the space below each.

High Low

5 4 3 2 1 The IPE started on time.

5 4 3 2 1 The IPE was well organized.

5 4 3 2 1 The equipment at each station was in usable condition.

5 4 3 2 1 The stations were reasonably private and free of distractions.

5 4 3 2 1 The Instructor/Coordinator addressed and responded to my concerns.

5 4 3 2 1 The State Evaluator adequately addressed my questions and/or conflicts regarding the IPE.

If you answered 3 or less on any of the above questions, please provide us with more information, as we wish to improve the overall process. (use the back of the form if needed)

How many IPEs have you participated in (circle one)? 0 1-3 4-7 7 or more

Was an exam-training program provided to you before you participated as a PTA?

(Circle one) Yes No

Were you a teaching assistant or practical assistant for this program?

(Circle one) Yes No

Did you ever participate as a tester in under the old system state practical exam process?

(Circle one) Yes No

Is there anything that you believe could be done to improve the Integrated Practical Exam process?